Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)694-1639

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN M2E LLC

> Certificate of Status Certified Copy 0 Page Count 04 Stimated Charge \$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 26 Lu.

K. SALY

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



m2e LLC	
(Name of the Limited Liability Company as it now appears (A Florida Limited Liability Company)	gp our records.)
The Articles of Organization for this Limited Liability Company were filed on 05/1 Florida document number L05000048588	17/2005 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company her	Œ:
m2e International Holdings LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the de	signation "LLC" or the ablneviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our reagent and/or the new registered office address here:	cords, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	du street address
	Florida Zip Code
City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agree to act in this conversions of all statutes relative to the proper and complete performance of accept the obligations of my position as registered agent as provided for in Converge to the merely reflect a change in the registered office address, I hereby company has been notified in writing of this change.	ny duties, and I am familiar with and hapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			⊟Remove
			☐ Change
			□Remove
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Signature of a member or authorized representative of a member	nted December 23rd	ul				

Filing Fee: \$25.00